



Effective on 12/08/2004.

Fees are subject to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$120.00

Complete if Known

Application Number	09/991,200
Filing Date	November 16, 2001
First Named Inventor	Samuel Cavallaro
Examiner Name	Lilian Vo
Art Unit	2127
Attorney Docket No.	2000P09062US01

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 50-2828 Deposit Account Name: Jack Schwartz

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims		
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims		
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): One month extension of time**Fees Paid (\$)**

\$120.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 34,721	Telephone 212-971-0416
Name (Print/Type)	Jack Schwartz		Date November 8, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IFW 2127

Application No. 09/991,200

Attorney Docket No. 2000P09062US01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Samuel Cavallaro et al.
Application No.: 09/991,200
Filed: November 16, 2001
Title: Fully Integrated Critical Care Workstation
Examiner: Lilian Vo
Art Unit: 2127

AMENDMENT

Mail Stop Amendment
Commissioners for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action date July 8, 2005 for which a shortened statutory period of three months ending October 8, 2005 was set in which to respond, and for which pursuant to 37 CFR 1.136(a), a one-month extension, ending November 8, 2005, was granted, the following amendments and comments are submitted and reconsideration of the rejections is respectfully requested.

Attached is a Credit Card Authorization Form authorizing a charge of one hundred and twenty dollars (\$120.00) due for the one-month extension under 37 CFR 1.136(a).

Applicants submit that in view of the attached Certificate of Mailing this response is timely.

Listing/Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 4 of this paper.